

Waiver Rules and Definitions relating to Clinical Eligibility

Wyoming Medicaid Rules, Chapter 41, Adult DD Waiver, Definitions

"Psychologist." A person licensed to practice psychology pursuant to W.S. § 33-27-113(a)(v).

"Mental retardation." A diagnosis as determined by a psychologist per the American Association on Mental Deficiency, Classification in Mental Retardation (Herbert J. Grossman ed., 8th ed. 1983).

Clinical eligibility criteria. An applicant is considered clinically eligible if he or she has:

- (i) A diagnosis of mental retardation as determined by a psychologist, or
- (ii) A diagnosis of a related condition as determined by a physician and functional limitations verified by a psychologist, ${\bf and}$
 - (iii) An Inventory for Client and Agency Planning (ICAP) services score equal to or less than 70, or
- (iv) When the Inventory for Client and Agency Planning score is more than 70, the applicant has an Inventory for Client and Agency Planning deficit in 3 or more of the following 6 domains:
 - (A) Self-care
 - (B) Language
 - (C) Learning/cognition
 - (D) Mobility
 - (E) Self-direction, and
 - (F) Independent living, and
 - (v) A completed LT-MR-104 that verifies that the participant or applicant meets the ICF/MR level of care.
- (vi) Financial eligibility. Eligibility for covered services is limited to persons who meet the income and resource criteria set forth in the waiver and in the rules and policies of the Wyoming Medicaid program, as determined by the Department of Family Services.

"Related condition." A condition that results in a severe, chronic disability affecting an individual which manifests before he or she reaches age twenty-two and that is attributable to cerebral palsy, seizure disorder, or any condition other than mental illness that is closely related to mental retardation and that requires similar services, as determined by a licensed psychologist or physician.

Determination of clinical eligibility. A person shall not receive covered services unless that person is clinically eligible. The determination of a person's clinical eligibility shall be made as follows:

- (i) Psychological evaluation.
- (A) The applicant and the individually-selected service coordinator shall arrange for a psychological evaluation to determine whether the applicant has a diagnosis of mental retardation or a related condition.
- (B) If the applicant has a diagnosis of mental retardation or a related condition, he or she shall be further assessed pursuant to (ii)(B) of this Section to determine clinical eligibility.
- (C) The Division may obtain a second opinion on a psychological evaluation from a contracted expert in order to confirm or deny that an applicant has a related condition.

Chapter 42, Child Waiver, Definitions

"Developmental disability." As defined in federal law (42 U.S.C. § 15002 (8)), a severe, chronic disability of an individual that:

- (i) Is attributable to a mental or physical impairment or combination of mental and physical impairments.
- (ii) Is manifested before the individual attains age 22.
- (iii) Is likely to continue indefinitely, and
- (iv) Results in substantial functional limitations in 3 or more of the following areas of major life activity: (A) Self-care



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- (B) Receptive and expressive language
- (C) Learning
- (D) Mobility
- (E) Self-direction
- (F) Capacity for independent living
- (G) Economic self-sufficiency, and
- (v) Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.

Section 6. Assessment and Eligibility.

- (a) Eligibility under this Chapter is limited to persons who complete the application process and who meet the following requirements for clinical eligibility and financial eligibility. In addition, in order to be eligible for the waiver, all persons shall be:
 - (i) A United States Citizen as determined by the Department of Family Services.
 - (ii) A resident of Wyoming as determined by the Department of Family Services.
 - (iii) Under 21 years of age.
 - (b) Clinical eligibility criteria. An applicant is considered clinically eligible if he or she has:
 - (i) A diagnosis of mental retardation as determined by a psychologist, or
- (ii) A diagnosis of a related condition as determined by a physician and functional limitations verified by a psychologist, and
 - (iii) An Inventory for Client and Agency Planning (ICAP) age adjusted services score equal to or less than 70, or
 - (iv) An adaptive behavior quotient of 0.50 or below for children birth through age 5, or
 - (v) An adaptive behavior quotient of 0.70 or below for individuals age 6 through age 20, and
 - (vi) A completed LT-MR-104 that verifies that the participant or applicant meets the ICF/MR level of care.

Chapter 43, ABI Waiver, Definitions

(a) "Acquired brain injury."

- (i) Any combination of focal and diffuse central nervous system dysfunction, both immediate and/or delayed, at the brain stem level and above.
- (ii) These dysfunctions are acquired through the interaction of any external forces and the body, oxygen deprivation, infection, toxicity, surgery, and vascular disorders not associated with aging.
 - (iii) It is an injury to the brain that has occurred since birth.
 - (iv) It may have been caused by an external physical force or by a metabolic disorder(s).
- (v) It includes traumatic brain injuries such as open or closed head injuries and non-traumatic brain injuries such as those caused by strokes, tumors, infectious disease, hypoxic injuries, metabolic disorders, and toxic products taken into the body through inhalation or ingestion.

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- (vi) It does not include brain injuries that are congenital or brain injuries induced by birth trauma.
- (vii) These dysfunctions are not developmental or degenerative.

Clinical eligibility criteria. An applicant is considered clinically eligible if:

- (i) The applicant has met the medical determination criteria pursuant to this section, and
- (ii) The neuropsychological or other evaluations confirm that the applicant meets the following:
 - (A) Has a score of 42 or more on the Mayo Portland Adaptability Inventory (MPAI), or



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- (B) Has a score of 40 or less on the California Verbal Learning Test II Trials 1-5 T, or
- (C) Has a score of 4 or more on the Supervision Rating Scale, or
- (D) Has an Inventory for Client and Agency Planning (ICAP) service score of 70 or less, and
- (iii) A completed LT-ABI-105 verifies that the participant or applicant meets the ICF/MR level of care.

AAMR Definitions:

Mental retardation refers to significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period.

General intellectual functioning is operationally defined as the results obtained by assessment with one or more of the individually administered standardized general intelligence tests developed for that purpose.

Significantly subaverage is defined as IQ of 70 or *below* on standardized measures of intelligence. This upper limit is intended as a guideline; it could *be* extended upward through IQ 75 or more, depending on the reliability of the intelligence test used. This particularly applies in schools and similar settings if behavior is impaired and clinically determined to *be* due to deficits in reasoning and judgment.

Deficits in adaptive behavior are defined as significant limitations in an individual's effectiveness in meeting the standards of maturation, learning, personal independence, and/or social responsibility that are expected for his or her age level and cultural group, as determined by clinical assessment and, usually, standardized scales.

Developmental period is defined as the period of time between conception and the 18th birthday. Developmental deficits may be manifested by slow, arrested, or incomplete development resulting from brain damage, degenerative processes in the central nervous system, or regression from previously normal states due to psychosocial factors.

Upper IQ Limit for Mental Retardation

The upper limit of IQ 70 has been arrived at by professional consensus, after consideration of the consequences of setting a higher or lower value. The maximum specified IQ is not to be taken as an exact value, but as a commonly accepted guideline. It is true that legislation, the courts, and service agencies often employ exact IQ values to determine eligibility for services, but the consistent point of view of AAMD and of professionals serving mentally retarded populations is that clinical assessment must be flexible. Therefore, the judgment of clinicians may determine that some individuals with IQs higher than 70 will be regarded as mentally retarded and others with lower IQs will not. For that reason, the recommended ceiling may be extended up through IQ 75, particularly in school settings where intellectual performance is a prerequisite for success and special educational assistance may be required.

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